	PATENT APPLICATION FEE DETERMINATION RECORD												
Effective October 1, 2003													
CLAIMS AS FILED - PART I									YTITK		OTHER	THAN	
TOTAL CLAIMS (Column 2)								PE C		OR	SMALL	ENTHY	
π	TAL CLAIMS		3	1_				RATE	FEE		RATE	FEE	
FC	)R		NUMBER FILED		NUMBER EXTRA		84	BASIC FEE 385.00		OR	Basic Fee	770.00	
70	TAL CHARGE	BLE CLAIMS	3200	mas 20=	•		L	X5 9= 10X		OR	X\$18=		
	DEPENDENT C		minus 3 e				L	X43= 86		OR	X86=	·	
MULTIPLE DEPENDENT CLAIM PRESENT						Γ	+145+		OR	+290±			
• If the difference in column 1 is less than zero, enter "0" in column 2								OTAL	879	OR	TOTAL		
CLAIMS AS AMENDED - PART II 2 6 04									ENERGY.	-	OTHER		
(Column 1) (Column 2) (Column 3)							-3	MALL	ENTITY	OR I	SMALL		
AMENDMENT A	·	REMAINING AFTER AMENDMENT		PREVICE PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL PER		RATE	ADDI- TIONAL PEE	
	Total	• 32	Minus	<b>-</b> 3	<u>Z</u> .	•-	7	(S 9=	-,,,,	OR	XS18=		
ENE!	Independent	٠ ٣	Minus	3	5	• ~		K43=		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								0				
				. •			Ŀ	1450		OR	+290=		
9/2/6 (Cohumn 1) (Cohumn 2) (Cohumn 3)							'ADI	TOTAL OIT. FEE		OR	TOTAL ADDIT, FEE		
77 19000111 27 1990011 27													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID I	BER	PRESENT EXTRA	ſ	VATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 32	Minus	- 3	2	•	×	S 9=		OR	X\$18=		
AME	Ingependent	• 5 NTATION OF MU	Minus Tiel 6 061	C	5 494	•		(43-		ÖR	X86=		
Ш	THE SE	IT IN OF BU		CUSCAL	<u>ÇOW</u>		•	145=		OR	+290=		
	11 10	(Summ 1)				•	ADE	TOTAL II. FEE	•	OR	TOTAL	_	
	11-10-	(Column 1)		(Colum	ın 21	(Column 3)				·			
SMT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	\[ \begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
3	Total	7, 1	Minus	• (2	3	· 0	\ <u>_</u>	5 9-	-755-		X\$18=	FEE_	
9	independent	• 😽	Minus	*** /	<del>\</del>	• ()			[	OR			
₹	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT	CLAIM		Ľ	43-		OR	X86=		
+145=										OR	+290=		
"If the entry in column 1 is less than the entry in column 2, write "V" in column 2.  "If the "Righest Number Previously Paid Fer" IN THIS SPRCE is less than 20, enter "20."  ADDIT, FEE  OR ADDIT, FEE  OR ADDIT, FEE													
7	he Highest Muni	nter Previously Paid ber Previously Paid	For (Total or	independe	ness their	gåpes umpe. 2' eue. 3'.			ropriste baz				

FORM PTO-675 (Rev 1003)

OROL, V S. DEPARTMENT OF CO.